

# **Cascade County Special Use Permit Application**

Cascade County Planning Department 121 4th St N, Suite 2H-2I Great Falls, MT 59401 Phone: 406-454-6905 Fax: 406-454-6919

| Permit No:    |
|---------------|
| App. No.:     |
| Applied Date: |

### **General Information**

A Special Use Permit (SUP) is required for uses in which conformance to additional standards will be required due to characteristics that are unique and special to the use. SUPs are to be issued for one specific use and are required for each tract of land. Legally issued SUPs shall expire one year after the date of approval if construction, or the use permitted, has not started. A one-time only six (6) month extension may be granted by the Zoning Board of Adjustment (ZBOA) upon request. SUP applications require a non-refundable application fee of four hundred and fifty dollars (\$450.00). Each SUP application shall be accompanied by an Location/Conformance (L/C) Permit application for changes in use and/or structures associated with the SUP application.

### **Application Information**

| Property Owner Name:  | PATRICIA CURNEY                                    |                     |
|-----------------------|--|---------------------|
| Applicant Name:       | PATRICIA CURNEY                                    |                     |
| Application Type:     | ■ Change of Use                                    | ☐ New Structure(s)  |
| Special Use Call Out: | To allow a lodge facility for Outfitter/Guide fish | nerman and clients. |

#### **Understanding the Regulations**

The proposed use must be specifically mentioned as a category in <u>Uses Permitted Upon Issuance of a Special Use Permit</u> within Section 7 of the Cascade County Zoning Regulations. Portions of the County Zoning Map and the Zoning Regulations are available at the Cascade County Website at <a href="http://departments.cascadecountymt.gov/planning">http://departments.cascadecountymt.gov/planning</a>.

### **Steps of the Application Process**

- (1) Schedule a Pre-Application meeting with planners to ensure the project will meet the standards for Special Use Permits as outlined within Section 7 of Cascade County's Zoning Regulations.
- (2) Complete, sign and submit a Special Use Permit application, Location/Conformance Permit application and a Use Statement Form, with the \$450.00 application fee to Planning Staff.
- (3) Diagrams, business plans, photographs and other documents may be requested as part of a complete application, depending on the applicant's proposal.
- (4) Planning Staff will notify interested agencies of the proposed project to request comments for the application.
- (5) Planning Staff will schedule a public hearing before the Cascade County Zoning Board of Adjustment;
- (6) Legal notice will be published twice in the Great Falls Tribune with at least six (6) days separating each publication.
- (7) Notice will be sent to all adjacent landowners via certified mail.
- (8) Planning Staff will present the application to the Zoning Board of Adjustment along with recommendations, based on findings of facts.
- (9) The Zoning Board of Adjustment will make a determination on the application; three (3) affirmative votes are needed to issue the permit.
- (10) Upon written notice from the Planning Staff, the applicant may begin the permitted special use.

- (11) Permits may be revoked or expire for the following reasons:
  - a. The Zoning Board of Adjustment finds them in violation of the conditions of the permit or another regulation/ordinance.
  - b. Approval is valid for one particular use and shall expire one year after the date of approval, if construction or the use has not started. The Zoning Administrator may grant a one-time only 6 month extension on the Zoning Board of Adjustment Approval.
  - c. The Special Use Permit shall expire if the use ceases for six (6) months for any reason. Any future extension requests must be granted by the Zoning Board of Adjustment prior to the date of expiration.

### **SUP General Impacts Criteria**

Explain how the proposed use contributes to, hinders, or otherwise impacts each of the criteria below. All criteria must be discussed. If criteria are not applicable, please explain why. Attach drawings, additional text, site plans, and any other documents that will assist staff and the board in reviewing the proposed use. The more information you can provide, the easier it is for staff and the *Zoning Board of Adjustment* to review the application.

(1) The proposed development will not materially endanger the public health or safety.

 a. Traffic conditions in the vicinity, including the effect of additional traffic on streets and street intersections, and sight lines at street intersections and approaches:

 There is very light traffic at this location and proposed use will not bring much more traffic. It is a right onto the property.
 b. Provision of services and utilities, including sewer, water, electrical, telecommunications, garbage collections, and fire protection:
 There will be a minimum added usage to the current use maybe 20-40 more nights of use.

d. Protection of public, community, or private water supplies, including possible adverse effects on surface waters or ground water:

| None - No improvements. |  |
|-------------------------|--|
|                         |  |
|                         |  |
|                         |  |

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None - No improvements.

| a. The               | sed development is a public necessity, or will not substantially impact the value of adjoining property.<br>The relationship of the proposed use and the character of development to surrounding uses and velopment, including possible conflicts between them and how these conflicts will be resolved. |
|----------------------|--|
| This property and    | the number of customers would not effect adjoining property as there is sufficient parking and roperty to provide a buffer and not effect adjoining property.  |
| area around the pr   | operty to provide a burier and not effect adjoining property.  |
| the                  | nether the proposed development is so necessary to the public health, safety, and general welfare of ecommunity or County as to justify it regardless of its impact on the value of adjoining property.  |
| This will not effect | any of the items above.  |
|                      |  |
| a. Th                | sed development will be in harmony with the area in which it is located.  e relationship of the proposed use and the character of development to surrounding uses and velopment, including possible conflicts between them and how these conflicts will be resolved.                                     |
| This house is mad    | e for the enjoyment of the river and other recreational opportunities and should be shared by others.  |
|                      |  |
| b. Co                | nsistency with the municipal and joint land use plans incorporated by the Growth Policy.   |
| Consistency will be  | e maintained.  |
| 1                    |  |
|                      | SUP Growth Policy Criteria   |
| objectives must be   | oposed use will be consistent with each of the Cascade County Growth Policy goal objectives. All discussed. If an objective is not applicable, please explain why. The more information you can it is for staff and the Zoning Board of Adjustment to review the application.                            |
| Goal 1: Sustain an   | d strengthen the economic well-being of Cascade County's citizens.   |
| Objectives:          |  |
|                      | retention of existing businesses and expansion of existing businesses, new businesses, value-added nolesale and retail businesses, and industries including agriculture, mining, manufacturing/processing ducts.   |
|                      | e potential to provide locals with jobs and clients that will be in the area spending money in the   |
| local businesses in  | n Cascade County.  |
| B. Stabilize and d   | iversify the county's tax base by encouraging the sustainable use of its natural resources.  |

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| Al  | most every client will purchase or had purchased a fishing license which funds go back to providing revenue and   |              |
|-----|---|--------------|
| su  | apport for the fishing industry. The majority will also hire local outfitters/guides and patron the local dining businesses   | ò. <b>;;</b> |
| Th  | ne clients purchase supplies and new equipment for their stay.  | -            |
| C.  | Identify and pursue primary business development that complements existing business, which is compatible with communities, and utilizes available assets. Identify and pursue targeted business development opportunities to include, but not limited to, manufacturing/heavy industry, telecommunication, and youth/social services. |              |
| Th  | nis usage only adds to the variety of choices to stay along the Missouri River and it is currently the only facility  |              |
| tha | at can accomodate groups or families of 12.   | +            |
| _   |   |              |
| D.  | Promote the development of cultural resources and tourism to broaden Cascade County's economic base.  |              |
| Lo  | odging is the staple of tourism along the Missouri River by providing local places for tourist to stay.   |              |
| -   |   |              |
| E.  | Foster and stimulate well-planned entrepreneurship among the county's citizenry.  |              |
| CI  | lients will want to come back to Cascade County and bring their families for recreating and if they have a business   | 0            |
| th  | ey may find that Cascade County would be an ideal place to relocate their family and/or business.   |              |
| F.  | Promote a strong local business environment. Encourage and strengthen business support mechanisms such as chamber of commerce, development organizations and business roundtable organizations.   |              |
| Th  | his usage will help support business relationships to have potential clients see what Cascade County has to offer   |              |
| as  | s a potential for relocating.   | 8            |
|     |   |              |
| G.  | Improve local trade capture for Cascade County businesses. Promote local shopping as well as well-planned businesses and new businesses.  |              |
| M   | ost clients will fly into Great Falls or Helena and shop or dine before and after trip. There will tend to be   |              |
| in  | creased revenue to the area for other items such as car rentals, and other recreational tourist items.  |              |
| H.  | Network with and support other economic development efforts in the region and statewide, in recognition of Cascade County's interdependence with other communities and to leverage available local resources.  /A - We will not be developing the region.   | 6            |
| _   |   |              |
|     |   |              |

| W        | e are 100% behind the growth of business in agricultural economy - our proposal will not effect the agricultural   |
|----------|--|
| ec       | onomy.   |
| J.       | Stimulate the growth of the economy by encouraging the use of alternative methods of energy production, includin wind energy.  |
|          | e support use of alternative method of energy but at this time there are no change predicted at this time.   |
|          | al 2: Protect and maintain Cascade County's rural character and the community's historic relationship with natural ource development.  |
|          | Objectives:  |
| Α.       | Foster the continuance of agriculture and forestry in recognition of their economic contribution and the intrinsic natural beauty of grazing areas, farmlands and forests.   |
|          | e will foster the intrinsic natural beauty as the main draw for fisherman to come to this location.  |
| В.       | Preserve Cascade County's scenic beauty and conserve its forests, rangeland and streams, with their abundant wildlife and good fisheries.  |
| W        | e have maintenance and clean up after each visitor to ensure each visitor has the best experience.   |
|          | Preserve Cascade County's open space setting by encouraging new development to locate near existing towns and rural settlements and by discouraging poorly designed, land subdivisions and commercial development. |
| <u>W</u> | e have had the boundaries redrawn to maintain open space.  |
| —<br>D.  | Assure clean air, clean water, a healthful environment and good community appearance.  |
|          | e believe our clients come for the clean air and water and therefore work to have as little impact on both the water and air quality.  |
|          |  |

| Ε.       | <ul> <li>Support the development of natural resources including but not limited to timber, mining, oil and gas production<br/>and renewable energy production.</li> </ul> |      |  |  |  |  |  |
|----------|---|------|--|--|--|--|--|
| W        | We are a business that has a low impact to the natural resources and would support low impact on development of   |      |  |  |  |  |  |
| na       | tural resources.  |      |  |  |  |  |  |
| F.       | Continue to work with federal and state agencies to redevelop properties within Cascade County which are curre undergoing Superfund and Brownfields processes.            | ntly |  |  |  |  |  |
| We       | e are in support of changes that maintain or improve the land and environment.  | 0    |  |  |  |  |  |
| <u>G</u> | pal 3: Maintain agricultural economy.   |      |  |  |  |  |  |
|          | Objectives:   |      |  |  |  |  |  |
| A.       | Protect the most productive soil types.   |      |  |  |  |  |  |
| W        | e will maintain and improve the land that our property is on to ensure it protects the soil.  | G    |  |  |  |  |  |
| _        |   |      |  |  |  |  |  |
| В.       | Continue to protect soils against erosion.  |      |  |  |  |  |  |
| <u>W</u> | e are not directly on the river, but we work to protect against erosion.  | G    |  |  |  |  |  |
| —<br>С.  | Protect the floodplain from non-agricultural development.   |      |  |  |  |  |  |
| Th       | ne floodplain is critical to keep intact and we are a low impact on the area due to location.   | +    |  |  |  |  |  |
| <br>D.   | Support the development of value-added agricultural industry in Cascade County utilizing the products from the regional area.   |      |  |  |  |  |  |
| <u></u>  | le support local businesses & products and will recommend to our clients the use of our local businesses and produ  | ctq  |  |  |  |  |  |
|          |   |      |  |  |  |  |  |

### Goal 4: Retain the presence of the US Military in Cascade County

### Objectives:

| A.        | Encourage the federal congressional delegation to actively support maintaining the current mission status at a minimum.   |          |
|-----------|---|----------|
| We        | e understand and desire the current mission status.   |          |
| В.        | Promote the location of additional military missions in Cascade County.   |          |
| We        | e are in agreement that military missions are critical to the local impact on our economy.  | <u> </u> |
| —<br>С.   | Encourage the reactivation of the runway at Malmstrom Air Force Base for fixed wing operations.   |          |
| We        | e don't have any history or experience in this field and do not have data for input on this subject.  | <u> </u> |
| <br>D.    | Refer to the Joint Land Use Study for resolving conflicts and promoting mission compatible development.   |          |
| _W        | e understand the Joint Land Use Study for resolving conflicts.  |          |
|           | al 5: Preserve and enhance the rural, friendly and independent lifestyle currently enjoyed by Cascade County's  |          |
| citi      | zens.   |          |
|           | Objectives:   |          |
| A.        | Maintain Cascade County's citizens independent lifestyle and minimize local governmental intervention, to the extent possible, consistent with the requirements of a continually evolving economy and constantly changing population. |          |
| Th        | ne independent lifestyle is a core belief for us and would encourage to keep the governmental intervention to a   | 0        |
| <u>mi</u> | nimum.  |          |
| В.        | Preserve and promote Cascade County's rich cultural heritage, rooted in natural resource development and reflected in its numerous cultural/historic sites and archaeological areas.  |          |
| W         | e are in the tourism industry. The more the clients can enjoy Cascade County the better. This ensures they will   |          |
| <u>re</u> | turn and contribute to our economy.   |          |
|           |   |          |

| present at the wildland-urban interface.  | ras       |
|---|-----------|
| We support fire prevention. Fires are very harmful to fishing habitats and other animal habitats. We stress fire  | e         |
| control to all of our clients.  | Ð         |
| D. Encourage the continued development of educational programs and facilities, recreational opportunities are and health services for all county residents.   | nd spaces |
| This is a part of our core business we are a low impact recreational business that contributes to the local econom  | my at 🙃   |
| a high level.   |           |
| ATTEST: I hereby certify that the information given herein is true and correct to the best of my knowledge. The no restrictions placed upon my property which would prohibit the issuance of this permit. If there are any restrictions placed upon my property which would prohibit the issuance of this permit. If there are any restrictions permit shall become null and void. I hereby grant permission to any Cascade County Zoning Official to my property to inspect for compliance with the County Zoning Regulations in relation to this application. | rictions, |
| Printed Name of Applicant: PATRICIA CURNEY  |           |
| Signature of Applicant: <u>Value Curry</u> Date: <u>3-18-20</u>   | 120       |
| Printed Name of Property Owner: PATRICIA CURNEY   |           |
| Signature of Property Owner: Patricia Cury Date: 2-18-202   | -0        |
|   |           |

|              |                       |                  | Office   | e Use Only   |                      |                         |  |
|--------------|-----------------------|------------------|----------|--|----------------------|-------------------------|--|
| Fee: □ A     | oplication (\$450.00) |                  |          | - Committee of the comm | Check No.:           | Cash                    |  |
|              |                       |                  |          | plication Number:  |                      |                         |  |
|              | Hearing Date:         |                  | ☐ Cor    | npleted L/C Aր   | oplication(s) $\Box$ | Completed Use Statement |  |
| Date Applica | tion Approved:        |                  | Associ   | ated L/C Perm  | it Number(s):        |                         |  |
| Approved Pe  | rmit Number:          |                  |          |  |                      |                         |  |
| Approved by  | (staff):              |                  |          |  |                      |                         |  |
|              |                       |                  | Rev      | view Items   |                      |                         |  |
|              |                       | SUP General Ir   | npacts   | Applicant Res  |                      |                         |  |
| 1.a.         | ☐ Insufficient        | ☐ Sufficient     |          | 2.a.   | Insufficient         | Sufficient              |  |
| 1.b.         | ☐ Insufficient        | ☐ Sufficient     |          | 2.b.   | Insufficient         | Sufficient              |  |
| 1.c.         | ☐ Insufficient        | Sufficient       |          | 3.a.   | Insufficient         | Sufficient              |  |
| 1.d.         | ☐ Insufficient        | ☑ Sufficient     |          | 3.b.   | Insufficient         | Sufficient              |  |
|              | S                     | SUP Growth Polic | cy Crite | ria Applicant I  | Response Review      |                         |  |
| Goal 1. A.   | O Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 1. B.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 1. C.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 1. D.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 1. E.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 1. F.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 1. G.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 1. H.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 1. I.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 1. J.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 2. A.   | O Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 2. B.   | O Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 2. C.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 2. D.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 2. E.   | O Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 2. F.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 3. A.   | O Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 3. B.   | O Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 3. C.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 3. D.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 4. A.   | O Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 4. B.   | O Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 4. C.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 4. D.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 5. A.   | ☐ Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 5. B.   | O Insufficient        |                  |          | Sufficient   |                      |                         |  |
| Goal 5. C.   | ☐ Insufficient        |                  |          | ☐ Sufficient   |                      |                         |  |
| Goal 5. D.   | ☐ Insufficient        |                  |          | ☐ Sufficient   |                      |                         |  |
| Gual 5. D.   | La msumcient          |                  |          | Jullicient   |                      |                         |  |

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## **Cascade County Use Statement Form**

Cascade County Planning Department 121 4<sup>th</sup> St N, Suite 2H-2I Great Falls, MT 59401

Phone: 406-454-6905 Fax: 406-454-6919

| Permit No:    |  |
|---------------|--|
| App. No.:     |  |
| Applied Date: |  |

The Use Statement Form is required for all Special Use Permit applications and is designed to provide pertinent information about the proposed use. It is important that the use statement provides a complete understanding of your proposal. The use statement that you submit must address all the following items that apply to your proposal. Your use statement must be written in on this form or written in a legible manner on a separate sheet of paper and submitted with your Special Use Permit application in print or by email. If your responses are written on a separate sheet of paper, indicate the number of each response corresponding with the item numbers listed below. Where a definite answer cannot be provided for any of the items below, provide an estimate and indicate any uncertainty. Begin by indicating all relevant uses of the proposal below and proceed to address each item. The form will not be considered complete without a signed and dated submission by the landowner and/or applicant. □ Industrial Use type (check all that apply): □ Residential Commercial If the proposed use is residential only then only questions 1-6 are required. For uses that are commercial and/or industrial all questions must be addressed. If the item does not pertain to the proposed use, then indicate that the item does not apply. 1. Nature of the use - what do you propose to do and how do you plan to do it? Describe in detail. Special Use permit to allow rental of an existing lodge building to fishermen and clients of Outfitter/Guides Use an existing Lodge/Building that was previously in the same business prior to ownership change. Market the lodge toward fishermen and clients of Outfitters/Guides to provide local lodging. 2. Access to the site: Public Road ☐ Private Road Surface: ☐ Paved ☐ Gravel ■ Dirt Indicate the planned access points in the site plan. If a new approach will be required, contact either Montana Department of Transportation or County Road and Bridge Division. 3. Describe any planned advertising or signage. Include the size, appearance, and placement. Presently there is a wrought iron sign suspended on a post directly on the property. Advertising would include Internet and potential website, and Outfitters/Guides websites and stores. Potentially advertise in magazines and options directed towards fishing. 4. Will existing buildings be used, or will new buildings be constructed (or both)? Indicate new and old buildings or structures on the required site plan. Existing buildings will be used.

| <ol><li>Will any landscaping or fencing be developed? If so, describe the type of landscaping and/o<br/>elements planned. Use reference to the site plan for clarity.</li></ol> |   |  |  |
|---|---|--|--|
|   | Currently, none planned other than upkeep and maintenance to ensure minimal impacts.  |  |  |
|   | Fencing, if added, would be done to indicate property boundaries and minimal impacts, if any.   |  |  |
|   |   |  |  |
| 6.  | Does the proposed use require any other local, state, or federal permits or licensing? If so, indicate the permits and/or licenses and when they will be acquired. If the permit and/or license has already been acquired, provide the permit and/or license number.  Business registration through MT Revenue and Secretary of State has been completed. |  |  |
|   |   |  |  |
|   | Lodging Facility Sales and Use Tax will be applied for and filed with MT Revenue upon approval.   |  |  |
|   |   |  |  |
|   | If the proposed use is <u>residential only</u> , you may stop here and sign at the end of the form.   |  |  |
| 7.  | Operational time limits:  |  |  |
|   | Months (if seasonal): from March to October   |  |  |
|   | Days per week: 7  Hours: from 7 am to 7 pm  |  |  |
|   | Hours: from 7 am to 7 pm  |  |  |
|   | Total hours per day: 12   |  |  |
|   | Special activities: None  |  |  |
|   | Frequency:  |  |  |
|   | Hours: from to  |  |  |
|   | Are these indoors or outdoors?  |  |  |
| 8.  | Expected number of customers or visitors:  Average per day: 2  Maximum per day: 12  Hours (when they will be there): from 7 am to 7 am  |  |  |
| 9.  | Number of employees:  |  |  |
|   | Current: 0  |  |  |
|   | Future: 1-2   |  |  |
|   | Hours they work: from 10 am to 2 pm   |  |  |
|   | Do any live on-site as a caretaker? Possible  |  |  |
| 40  | Samina and delivery vehicles  |  |  |
| 10.   | . Service and delivery vehicles:  Number: 0   |  |  |
|   |   |  |  |
|   | Type:   |  |  |
|   | Frequency:  |  |  |

| 11. | Number of parking spaces for employees, customers, and service/delivery vehicles:  There is enough parking to accommodate 12+ vehicles and no impact non parking areas.                               |  |  |  |  |  |  |  |  |
|-----|---|--|--|--|--|--|--|--|--|
|     |   |  |  |  |  |  |  |  |  |
|     | Are any goods to be sold on-site? If so, are these goods grown or produced on-site or at some other location? Explain.  None.   |  |  |  |  |  |  |  |  |
| 13. | What equipment is used? If available, provide pictures or a brochure. Fishermen and clients provide their own equipment or utilize the equipment of the outfitter/guide.                              |  |  |  |  |  |  |  |  |
| 14. | What supplies or materials are used and how are they stored?  Only supplies and materials would be for the maintenance and cleaning of the facilities and stored in a respective area.                |  |  |  |  |  |  |  |  |
| 15. | Does the use produce any of the following by-products which may be considered a nuisance?  □ Noise □ Glare □ Dust □ Odor □ Smoke □ Other  If so, explain how this will be reduced or eliminated?  N/A |  |  |  |  |  |  |  |  |
| ۱6. | Does the proposed use involve livestock animals? If so, provide the types of livestock and the approximate number of each type of animal involved.  |  |  |  |  |  |  |  |  |
|     | N/A   |  |  |  |  |  |  |  |  |

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| N/A  | e disposed at and how often.   |   |
|--|--|---|
|  |  |   |
|  |  |   |
|  |  |   |
|  |  |   |
| Existing well is sufficient t  | er to be used (gallons per day) and the for all water needs.                     | ne source of water:   |
| 19. Explain which buildings o  | or what portion of buildings will be us  | sed in the operation. Use reference to the  |
|  | uildings in the site plan for clarity.   |   |
| The existing buildings and   | d structures comprise a complete fac   | ility that will be used at the lodge.   |
|  |  |   |
|  |  | 9   |
| 21. Will any outdoor lighting when they will be used. Only normal residential p                                    |  | ystem be used? If so, describe how and  |
|  | ation that will provide a clear unders   | tanding of the project or operation?  |
| •  |  |   |
| No.  |  |   |
| •  |  |   |
| •  |  |   |
| •  |  |   |
| No.  TEST: I hereby certify that the in  | formation given herein is true and corre<br>may be binding upon issuance of an a | ect to the best of my knowledge and acknowled   |
| No.  TEST: I hereby certify that the interest the information provided herein                                      | may be binding upon issuance of an a   | ct to the best of my knowledge and acknowled  |
| No.  TEST: I hereby certify that the in  | may be binding upon issuance of an a   | ect to the best of my knowledge and acknowledge pproved Special Use Permit with conditions.  Date: 2 - 18 - 20> |
| TEST: I hereby certify that the interest that interest the information provided hereinth name of Applicant: PATRIC | may be binding upon issuance of an a   | pproved Special Use Permit with conditions.   |



## Cascade County Location/Conformance Permit Application

Cascade County Planning Department 121 4th St N, Suite 2H-2I Great Falls, MT 59401 Phone: 406-454-6905 Fax: 406-454-6919

| Permit No:    |   |
|---------------|---|
| App. No.:     |   |
| Applied Date: | _ |

#### **General Information**

A Location/Conformance (L/C) permit is required: (1) for all changes of land use and commercial activities within the Cascade County Zoning Jurisdictional Area (ZJA) and (2) prior to the construction of all buildings and structures two-hundred (200) square feet or larger on all lands within the ZJA. L/C permits are not required for "site preparation," as defined in the Cascade County Zoning Regulations (CCZR). L/C permits are to be issued for one use and are required for each tract of land. Legally issued L/C permits shall expire one year after the date of approval if construction or the use permitted has not started. A one-time only twelve (12) month extension may be granted by the Zoning Administrator upon request. L/C permit applications require a non-refundable application fee of fifty dollars (\$50.00) unless non-site preparation work started prior to the issuance of an L/C Permit; post-work projects require a non-refundable application fee of two-hundred dollars (\$200.00).

### **Project Information**

| Project Address 31 SCENIC VALLEY LANE CASCADE MT 59421 |   |                                   |   |                     |                           |   |           |                      |                    |                   |
|--|---|-----------------------------------|---|---------------------|---------------------------|---|-----------|----------------------|--------------------|-------------------|
| Estimated Project Value (\$) N/A                       |   |                                   |   |                     |                           |   |           |                      |                    |                   |
|  | Legal<br>Description  | Tow                               | nship   | 16N                 | Range                     | 2W  | Section   | 17                   | COS No.            |                   |
|  |   | Sub                               | division  | N/A                 |                           |   |           |                      |                    |                   |
| Property   |   | Part                              | Part, Tract, Block, Lot Descriptors LOT 6A/7A OF DOC#P-2020-0000006 |                     |                           |   |           |                      | 0006               |                   |
| Description  | Parcel No.  |                                   |   |                     |                           | Geoco                                     | de 02-2   | 555-17-1-01          | -03-0000 & 02-2555 | 5-17-1-01-02-0000 |
|  | Total parcel a  | area                              | 8.42 +  | - 5.51              |                           | Unit:                                     | ■ Acres   | ☐ Squar              | re Feet            |                   |
|  | Name PATRICIA CURNEY  |                                   |   |                     |                           |   |           |                      |                    |                   |
| Property Owner   | Address 7209 FAIR OAK   |                                   |   |                     | PKWY BOERNE TX 78015-4548 |   |           |                      |                    |                   |
|  | Phone Numb  | Phone Number 210-386-6190 Primary |   |                     |                           |   |           |                      |                    |                   |
| Applicant  | Name PATRICIA CURNEY  |                                   |   |                     |                           |   |           |                      |                    |                   |
| (Contractor,   | Address 31 SCENIC VALLEY LANE CASCADE MT 59421                      |                                   |   |                     |                           |   |           |                      |                    |                   |
| Engineer, etc.)  | Phone Number 406-468-9328   |                                   |   |                     |                           |   |           |                      |                    |                   |
| Application  | ■ Change of use □ New build/alteration                              |                                   |   |                     |                           |   |           |                      |                    |                   |
| Туре   | Previous use: LODGE OUTFITTER/GUIDE ASSOCIATED CLIENTS              |                                   |   |                     |                           |   |           |                      |                    |                   |
|  | ☐ Single-family Residential ☐ Multi-family Residential ☐ Public/NGO |                                   |   |                     |                           |   |           |                      |                    |                   |
| Han to one   | □ Duplex □  |                                   |   | $\square$ $\bowtie$ | Mobile Home               |   |           | ☐ Sign               |                    |                   |
| Use type   | ■ Commercial □ In   |                                   |   |                     | dustrial                  |   |           | ☐ Registered Premise |                    |                   |
|  | ☐ Garage/Shop/Barn ☐ H  |                                   |   |                     | ome Occup                 | me Occupation $\Box$ Other:               |           |                      |                    |                   |
|  | Number of existing structures                                       |                                   |   | ures                | 3                         | Total existing structure area (sq. ft.) 5 |           | 5636                 |                    |                   |
| Structures   | Number of proposed structures                                       |                                   |   | ıctures             | 0                         | Total proposed structure area (sq. ft.) 0 |           |                      | 0                  |                   |
|  | Total area of alteration (sq. ft                                    |                                   |   | q. ft.)             | NONE                      |   |           |                      |                    |                   |
| Water/Waste  | Type of sewa  | age di                            | isposal   | 2 SE                | PTICS                     | Source                                    | e of wate | r supply             | WELL               |                   |

| Project Description:  |
|---|
| To use existing buildings previously used as a Lodge for outfitter/guide associated clients for the same type of  |
| lodge/business.   |
|   |
| Submission Checklist  |
| Location/Conformance Permit applications shall be submitted to the Cascade County Planning Department for review. The following checklist must be completed and signed by the applicant before the application can be reviewed. Where applicable, all required permits/forms must be attached to the application.   |
| ☐ A site plan prepared at a scale not less than one inch equals one-hundred feet (1" = 100') containing, where applicable, the following minimum information:   |
| ☐ Name and address of applicant.  |
| $\square$ Legal description and boundary lines of property being considered for review.   |
| $\square$ Existing and proposed land use upon the site.   |
| ☐ Names of owners and existing land use on adjacent property.   |
| ☐ Location, size, dimensions and uses of existing and proposed buildings and improvements.  |
| $\square$ Location and description of existing and proposed utilities.  |
| $\square$ Location and dimensions of curb cuts and access points.   |
| $\Box$ Location, size, dimensions and number of off-street parking spaces, including on-site vehicular driveways and type of surface improvements.  |
| ☐ Location and type of existing and proposed landscaping or buffering.  |
| ☐ Location, type and height of existing and proposed fencing and screening.   |
| $\Box$ Location, type and height of sight-obscuring improvement surrounding areas of storage for raw materials, finished products, machinery and equipment.   |
| ☐ Floodplain permit (attached). This is required if the project is in a regulated floodplain.   |
| ☐ Approach permit (attached). This is required if the proposed approach is from a county or state road.   |
| $\square$ Addressing application (attached). This is required if the subject property needs a structure addressed.  |
| ☐ Septic permit (attached). This is required for projects installing a septic system, re-utilizing a pre-existing septic system, or increasing the capacity of a pre-existing septic system on the subject property.  |
| ☐ General Permit for Storm Water Discharge Associated with Construction Activity (attached). This is required for projects that will disturb an acre or more of land.   |
| Attestation Statement and Signature   |
| I hereby certify that the information given herein is true and correct to the best of my knowledge. There are no restrictions placed upon my property which would prohibit the issuance of this permit. If there are any restrictions, there this permit shall become null and void. I hereby grant permission to any Cascade County Planner to enter my property to inspect for compliance with the County Zoning Regulations in relation to this application. |
| Signature of Applicant: Vatura Cura Date: 2-18-2020   |
| Signature of Property Owner: Patricia Curner Date: 2-18-2036  |

|                    |                 |             | Office Us                              | e Only               |                              |  |  |
|--------------------|-----------------|-------------|--|----------------------|------------------------------|--|--|
| Fee(s):            | ☐ Pre-work      | (\$50.00)   | ☐ Post-work (\$200                     | .00)                 | ☐ Addressing (\$25.00)       |  |  |
| Payment Type:      | $\square$ Check | No.:        |  | ☐ Cash               |                              |  |  |
| Date Application F | Received: _     |             |  | Application Number   | :                            |  |  |
| Date Application A | Approved: _     |             |  | Approved by (staff): | imber:                       |  |  |
| Approved Permit    | Number:         |             |  | Associated SUP Num   |                              |  |  |
|                    |                 |             | Review I                               | tems                 |                              |  |  |
| Zoning District:   |                 |             |  |                      |                              |  |  |
| Restrictions/Cove  | nants:          | ☐ Yes       | □ No                                   | Туре:                |                              |  |  |
| Physical/Legal Acc | cess:           | ☐ Yes       | J                                      | □ No                 |                              |  |  |
| Setback Requirem   | ients (ft):     | Front:      |  | Rear:                | Side:                        |  |  |
| Parking Requirem   | ents:           | Existing: _ |  | Required:            | Proposed:                    |  |  |
| Landscaping Requ   | irements:       | Frontage    | Option:                                | Buffer Option        | n:                           |  |  |
|                    |                 | Administr   | rative Relief Requeste                 | ed: ☐ Yes            | □ No                         |  |  |
|                    |                 | Administr   | rative Relief Granted:                 | ☐ Yes                | □ No                         |  |  |
| Height Requireme   | ents:           | ☐ Airpor    | t Zone:                                |                      | ☐ Military Overlay District: |  |  |
| Floodplain:        |                 | ☐ Yes       |  | □ No                 |                              |  |  |
|                    |                 | Permit At   | tached:                                | ☐ Yes                | □ No                         |  |  |
| Variance Request   | :               | ☐ Yes       |  | □ No                 |                              |  |  |
|                    |                 | Variance    | Approval Attached:                     | ☐ Yes                | □ No                         |  |  |
| Approach Permit:   |                 | ☐ Yes       |  | □ No                 |                              |  |  |
|                    |                 | Approach    | n Permit Attached:                     | ☐ Yes                | □ No                         |  |  |
| City-County Healt  |                 | ☐ Yes       |  | □ No                 |                              |  |  |
| Department Appr    | oval:           | Permit At   | ttached:                               | ☐ Yes                | □ No                         |  |  |
| Addressing Appro   | val:            | ☐ Yes       |  | □ No                 |                              |  |  |
|                    |                 | Addressir   | ng Approval Attached                   | : ☐ Yes              | □ No                         |  |  |
|                    |                 |             | Data Coll                              | lection              |                              |  |  |
| Permit Category    | Reside          | ential      | ☐ Public/NGO                           | ☐ Comme              | rcial 🗆 Industrial           |  |  |
| Permit Type        | ☐ Dwelli        | ng Unit(s)  | ☐ Administrative, Waste Management and |                      | ☐ Agriculture, Forestry,     |  |  |
|                    | ☐ Utilities     |             | Remediation Service                    |                      | Hunting or Fishing           |  |  |
|                    | ☐ Manu          | facturing   | ☐ Transportation a                     | and Warehousing      | ☐ Arts, Entertainment,       |  |  |
|                    | ☐ Consti        | ruction     | ☐ Mining, Quarryi                      | ng, O & G            | Recreation                   |  |  |
|                    | ☐ Inform        |             | ☐ Finance and Inst                     |                      | ☐ Accommodation and          |  |  |
|                    |                 |             | ☐ Real Estate and                      |                      | Food Services                |  |  |
|                    |                 | Admin.      | ☐ Prof., Scientific,                   | -                    | ☐ Educational Services       |  |  |
|                    |                 | Services    | ☐ Health Care and                      |                      | ☐ Wholesale Trade            |  |  |

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